

Did Kennedy Head Wound Indicate Shot Came from Front?

Fourth of five articles

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One shot missed the motorcade. A witness reported seeing a bullet hit the street near the railroad overpass. James Tague, who was standing near that spot, was hit by either a ricocheting bullet fragment or a chip dislodged when the bullet struck a curb. Subsequent examination of the curb by Tague and a policeman revealed a fresh bullet mark.

Although an exact trajectory cannot be established in such a case, the path of the fragment is much more consistent with a shot fired from the grassy knoll area than from the Depository building.

Spectrographic analysis of the metal smears left by the bullet demonstrated that it could not have been caused by a whole bullet of the type Oswald allegedly used. The commission concluded that it was caused by a fragment from one of Oswald's bullets, but could not demonstrate how any fast moving fragments could have exited from the limousine.

This would appear to provide evidence of a second assassin who fired bullets of a different type.

While a discussion of the President's wounds is exceedingly unpleasant, it is of utmost importance for determining the source of the shots.

Robert McClelland, a doctor in the Parkland Hospital, wrote in his report that the cause of death was a "gunshot wound of the left temple." Drs. Giesecke and Jenkins told the commission that they had observed a wound of the left temporal region. The priest who administered the last rites to the President noticed "a terrible wound over his left eye."

The autopsy report published by the commission, however, does not mention such a wound. It is unfortunate that the commission never cleared up this mystery.

President Kennedy received a very large wound in the head which blew off portions of the right side of his skull. Two eyewitnesses reported that portions of the President's skull were blown off and flew to the left and rear of the limousine, which was moving very slowly.

Since matter torn off by a bullet tends to follow the path of the bullet, all of the preceding evidence is indicative of a shot from the grassy knoll, to the right and in front of the limousine.

All of these observations are inconsistent with a shot from the Depository building.

Some other evidence that the head shot came from the right front (grassy knoll area) was provided by Philadelphia attorney Vincent Salandria. Using two slide projectors, he projected, simultaneously, frames of the Zapruder film which show the head hit.

This ingenious technique clearly demonstrated that the fatal head shot caused a violent movement of the President's head to the left and rear of the car. (This was not due to the motion of the limousine, since Jacqueline Kennedy did not move relative to the car.) Such movement is consistent with a shot from the knoll area but not from the Depository.

If the shot came from the Depository, then Newton's Second Law of Motion (conservation of momentum) was violated for the first time in three centuries!

While attempting to save the President's life, doctors at the Parkland Hospital enlarged the wound in his throat to facilitate breathing. The throat wound was therefore seen only by the doctors at the Parkland Hospital and Jacqueline Kennedy, who held the dying President on her lap during the race to the Parkland Hospital.

Mrs. Kennedy testified in an unusual session at which the only members of the commission present were Chief Justice Earl Warren and General Counsel J. Lee Rankin. She told those present that her recollections of the assassination differed from the newspaper accounts, but that she was willing to concede that she was in error.

She demonstrated extraordinary courage in volunteering a description of her husband's wounds. Her testimony concerning the wounds cannot be found in the transcript, however, and is replaced by the phrase: "(Reference to wounds deleted)." This section of her testimony has been placed in a special vault in the National Archives which cannot be opened for another 72 years.

On the afternoon of the assassination,

two doctors who had attended the President referred to the wound in the throat as an entrance wound. The first doctor to see the President described the wound as one of entrance in an official report written the same day.

Four days later, the chief of neurosurgery at Parkland Hospital was quoted as saying that the neck wound was an entrance wound.

An entrance wound is a small puncture, an exit wound is a larger ragged opening. The difference between the two is especially marked in the case of a bullet fired from a low-velocity rifle such as the one allegedly used by Oswald.

An entrance wound in the front is obviously inconsistent with an assassin firing from the rear. The first attempt to explain this away was the suggestion that the first shot was fired as the limousine rode down Houston St. toward the Depository, before it made the turn on to Elm St. The films and eyewitness testimony soon showed this to be false.

A second explanation was first presented by Life Magazine on Dec. 6, 1963. The claim was made that the President had turned his body completely around just before he was hit, so that he was hit in the throat from the Depository.

This explanation was invalid, however, as Life's editors should have known, since they had published portions of the Zapruder film the preceding week which clearly showed that the President was looking towards the knoll when hit.

But the editors of Life were not the only group in error. On Dec. 5 the FBI staged a reconstruction of the assassination to determine how the President could have received a bullet in the front of the throat from a rifle in the Depository.

The reconstruction was done in line with the theory that the President had turned around to wave at the crowd and was thus facing the Depository.

The commission was thus faced with a dilemma. The five members of the Parkland Hospital staff who had seen the throat wound (all of whom have had a great deal of experience with bullet wounds) testified that the wound in the President's throat was one of entrance.

The commission had, therefore, either to admit to a second assassin who fired from the knoll area or change the entrance wound to an exit wound. It chose the latter alternative.

The Secret Service seized all original films and tapes of the press conferences at which the Parkland doctors discussed the wounds. The commission could then safely allege that the Parkland doctors had "stated merely that it was 'possible' that the neck wound was a wound of entrance." This would imply, of course, that all the newspapers had misquoted the doctors, although they all gave identical accounts of what the doctors said.

In an attempt to get the Parkland doctors to reverse their previous testimony, commission attorney Arlan Spector asked a series of questions which requested the doctors to make certain assumptions. Spector asked them to assume that a bullet had entered the rear of the neck and passed through the neck undeflected, "exiting precisely at the point where" they "observe the puncture wound to exist!"

No court in the land would have allowed such a question. Spector led these physicians to the false belief that all other medical evidence contradicted their observations!

It is not surprising that two of the doctors said that if those assumptions were true, they believed it must have been an exit wound.

But even in the face of such a set of hypothetical "facts," two doctors would not completely alter their testimony.

Dr. Charles Baxter testified that although what Spector theorized was possible, it would be "unusual" and "unlikely," even assuming his set of "facts."

Dr. Ronald Jones testified that it could have been an exit wound under only one condition: if the exiting bullet was traveling so slowly so as just barely to drop out of the throat wound.

But the commission's case depends very heavily on this bullet going on and causing several serious wounds in Governor Connally, so it must have been traveling very fast.

Tomorrow: The medical evidence and the aftermath.